DEDI AVAILABLE CUPT 09/94/661													
							Application or Docket Number					,	
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									259	8-	1008	9/94	41,661
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EI	YTITY	OR	OTHER		
TC	TAL CLAIMS	38						RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED NUMBE			ER EXTRA	•	BASIC FEE	355.00	OR	BASIC FEE	· 710.00	CO Min
TOTAL CHARGEABLE CLAIMS			3 8 minus 20= *			18		X\$ 9=	:	OR	X\$18=	324	BEST
INDEPENDENT CLAIMS 6 minus 3 =				•	3		X40=		ÓR	X80=	240	_	
MULTIPLE DEPENDENT CLAIM P			RESENT					125-		1	+270=		A
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR		10-11	AVAILABLE
CLAIMS AS AMENDED - PART II 3/3/2 TOTAL OTHER THAN											THAN	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Colun	nn 2)	(Column 3)	•	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA-		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	СОРУ
	Total	. 8	Minus	<del>•</del> 3	Q	=		X\$ 9=		OR	X\$18=		~
	Independent	• /	Minus	*** (	0	=		X40=	<u> </u>	OR	X80=		
_	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			.405		1	+270=		
								+135= TOTAL		OR	TOTAL		
				(Only)	O\	(Column 2)		ADDIT. FEE		OR	ADDIT. FEE		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		1
	•		•	•				. TOTAL		OR	TOTAL		
				(Oaku	O\	(Column 3)		ADDIT. FEE		1011	ADDIT. FEE		
AMENDMENT C	1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Column 1) CLAIMS REMAINING AFTER		(Colur High NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
OME	Total	AMENDMENT -	Minus	**	ION	=	1	X\$ 9=	755		X\$18=	FEE	1
	Independent	•	Minus	***	•	=	1			OR		<del>                                     </del>	
₹		NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		1	X40=		OR	X80=		1
+135= OR +270=											· .		
••	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  TOTAL ADDIT. FEE  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												